U. S. Marine Corps
Alcohol Abuse Prevention
Campaign Plan

Briefing for
Commandant of the Marine Corps

"Keeping Faith"

Agenda

- Background
- Methodology
- Purpose
- Mission
- Framework
- Goals
- Pending Initiatives
- Implementation

Background

Identify the Problem

- 24th Executive Force Preservation Board (EFPB) identified *alcohol is the "common denominator" across spectrum of behavioral health problems*, e.g. Sexual Assault, Suicide (Feb 2011)

Find Solutions

- 25th EFPB directed an *Alcohol Abuse Prevention Campaign (AAPC)* to reduce alcohol abuse and associated problems (Sep 2011)
- Campaign kicked off (Oct 2011)
- Four Operational Planning Teams Conducted (Dec 2011)

Focus of Effort

- Apply the same strategy to alcohol as applied to suicide and sexual assault *(Leadership emphasis; Peer-to-Peer Model)*
- Levels of Risk and emphasize prevention
- Ownership by Marines at every level, the same way they own mission responsibilities
- Multi-pronged attack necessary to address co-occurring issues

Methodology

- 4 Operational Planning Teams (over 200 Marines and civilians) participated
  - Camp Lejeune (Nov 11)
  - Miramar (Nov 11)
  - Okinawa (Dec 11)
  - HQMC (Dec 11)
- Campaign plan formulation (Dec 11 – Jan 12)
- Campaign plan review and approval (Jan – Feb 12)
- Campaign plan Execution (Feb 12)

Purpose

Alcohol Abuse Prevention Campaign Plan:

- Provides structure for how to reduce negative effects of alcohol abuse
- Provides overview of specific tasks and efforts required to accomplish a reduction in alcohol-related incidents
- 7 goals with 67 assorted tasks

Mission

Increase Operational Readiness of the Marine Corps
by Reducing Alcohol Abuse and Misuse through Revolutionary Changes to Prevention and Treatment

Three Foundational Efforts:

- *"Levels of Risk" replace "Responsible Drinking"*
- *Change focus from the "Boom" being an alcohol-related incident to the "Boom" being alcohol use*
- *NCOs are the key; supported by SNCOs and Officers*

Levels of Risk

USMC Alcohol Consumption Continuum

No Risk	Low Risk	High Risk
• 0 standard drinks per day (Abstinence)	• No more than 4 standard drinks a day / 14 standard drinks a week- Men • No more than 3 standard drinks a day / 7 standard drinks a week- Women • No more than 1 standard drink per hour	• Consumes more than **EITHER** the single-day or weekly limits • Consumes more than **BOTH** the single-day or weekly limits • Drinking more than 1 standard drink per hour

"For me, 18 beers is 'responsible'"

Community & Medical Responsibility

Individual and Leadership Responsibility

http://pubs.niaaa.nih.gov/publications/RethinkingDrinking/Rethinking_Drinking.pdf

Levels of Risk

USMC Alcohol Consumption Continuum - Science

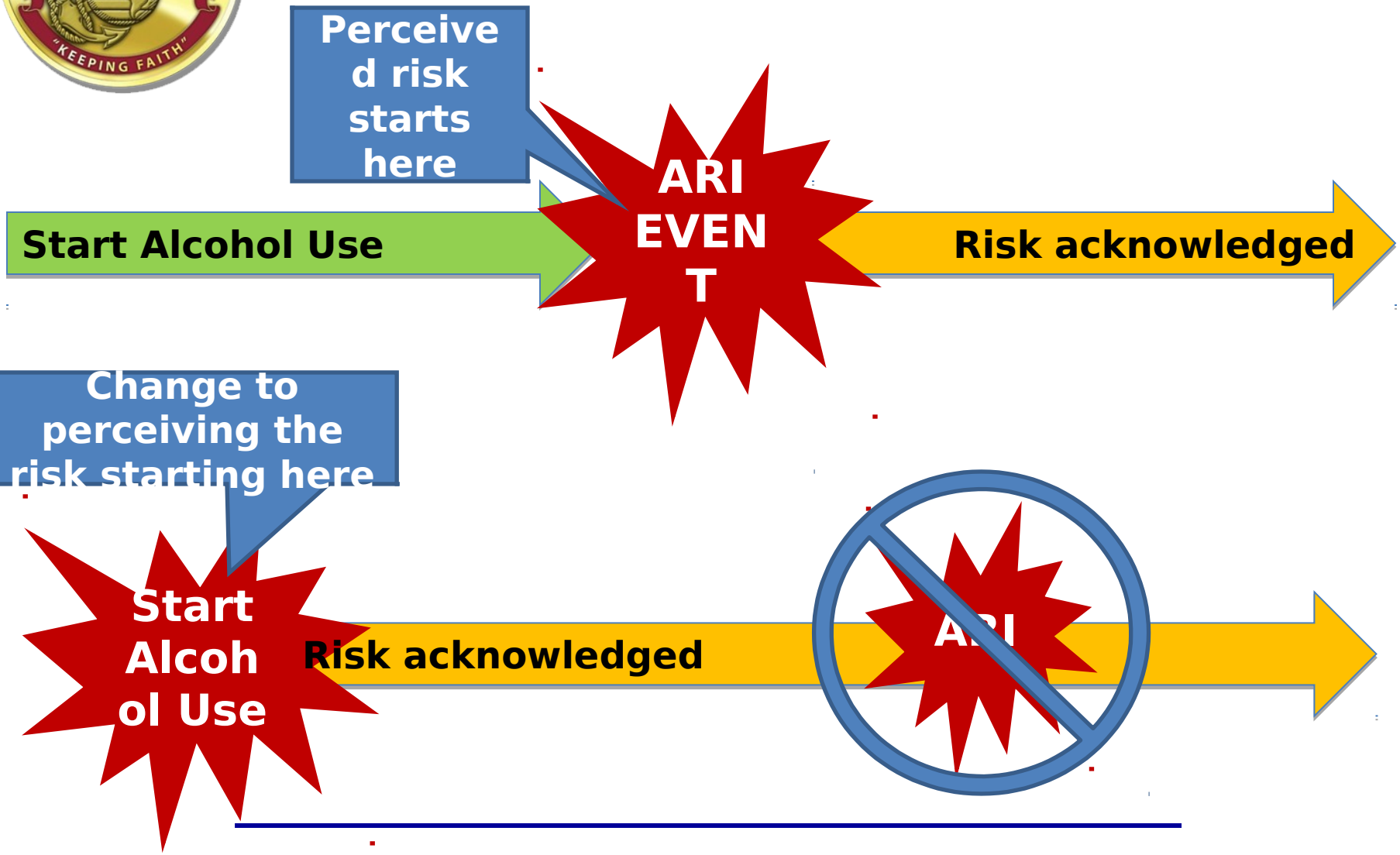
No Risk	Low Risk No more than 4 standard drinks a day /14 in a week (Men) and 3 standard drinks a day / 7 in a week (women)	High Risk Exceeds daily or weekly Low Risk Totals
	Only 2% of individuals who drink within both the "single-day" and weekly limits below have alcoholism or alcohol abuse diagnosis.	Drinking more than the single-day or weekly amounts is considered "at-risk". • About 1 in 4 people who drink this much meet criteria for alcohol abuse, the rest are at greater risk: 'High Risk' drinking chances of having an alcohol use disorder: • 1 time a month (20% chance) • 1 time a week (33% chance) • 2 times a week (50% chance)

For me, 18 beers is 'responsible'"

"Keeping Faith"

http://pubs.niaaa.nih.gov/publications/RethinkingDrinking/Rethinking_Drinking.pdf

Changing the "Boom"



Officers and SNCOs support the NCO's who are the Key!

- In positions to best affect change
- Need proper education and resources
- Need backing from SNCOs and Officers

"Marine Corps needs to have a zero tolerance policy concerning DUIs"

"responsible drinking is too difficult to define"

"Small group setting works best – guided discussions"

"Leaders need to keep their finger on the pulse concerning alcohol use."

"Replace safety stand downs - out dated and 'suck.' Need to be more interactive and better speakers"

Goal #1

Review and Improve Information Dissemination

- Disseminate information about alcohol use, misuse and abuse
- Strategic communications plan (include social marketing)
- Anti-stigma campaign
- Road shows
- Partnerships with peer-based training programs
- Greater visibility on alcohol abuse data and information

Goal #2

Review and Improve Prevention Education

- Review and improve alcohol abuse prevention education protocols
  - Installation prevention training plans
  - Training and education in all formal schools
  - Risk Drinking Continuum developed

- Implement standard alcohol abuse prevention training programs for Marines and civilians
  - Evidence-based training
  - Standardize PD's, workforce development and certifications
  - Make SACC procedures transparent

Goal #3

Review and Improve Environmental Strategies

- Assess alcohol marketing
  - Sales, consumption, policies, and regulations
  - Quality assurance measures and accountability
- Promote low-risk drinking
  - Command climate and intrusive leadership
  - Provide resources and tools
- Increase deterrent measures
  - Gate checks
  - Breathalyzer pilot

Goal #4

Review and Improve Alternative Activities

- Increase the use of alternative activities
  - Assessment of current installation activities
  - Provide host of exciting alternatives based on location
  - Single Marine Representative as command team member
  - Develop partnerships/coalitions

Goal #5

Review and Improve Community-Based Processes

- Build community-based partnerships
  - Preservation boards encourage early intervention for high-risk alcohol users
  - Develop local initiatives that promote low or no-risk alcohol consumption
  - Develop national and federal partnerships
- Exploit pre-existing family support networks

Goal #6

Review and Improve Problem Identification & Referral

- Implement strategies to identify and assist Marines needing support before an event happens
  - Streamlined referral process for self-referrals and all ARIs
  - Alcohol abuse prevention needs assessments

- Implement strategies to assist Marines needing support after an event happens
  - Increase information sharing methods between medical, behavioral health, law enforcement and commands

- Evaluate effectiveness of problem id & referral efforts

Goal #7

Review and Improve Treatment Processes

- Standardize substance abuse prevention and treatment services
  - Standard practices and treatment protocols
  - Case management system
- Substance Abuse Control Officer improvements
  - Standardize training
  - Professionalize billet
- Quality of care improvements
  - Staffing model assessment
  - Aftercare treatment protocol

Goal #7 (cont'd)

Review and Improve Treatment Processes

- Develop new ways to offer and improve substance abuse services
  - Evaluate use of non-traditional working hours
  - Develop partnerships and share best practices

- Evaluate the effectiveness of substance abuse treatments
  - Develop and implement strong quality assurance practices and protocols
  - Standardize accreditation practices

Pending Initiatives

Evaluation of Alcohol Abuse Prevention Campaign

- Develop and execute an evaluation to determine effectiveness of Campaign efforts with assistance from Navy Marine Corps Public Health Center
- Recommend course of action changes as appropriate

Implementation

- CMC/ACMC approval
- Briefing to senior USMC leadership at 26th EFPB (Mar 12)
- Draft Plan of Action and Milestones (POA&M)
- Develop working groups based on assigned tasks
  - Tracking and reporting on designated tasks

Alcohol Abuse Prevention Campaign Plan

Discussions